PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

B002-8000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			12					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	f	ÓB	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		*	0.		X\$ 9=	U	OR	X\$18=	
INDEPENDENT CLAIMS			6 minus 3 =		* 3			X43=	129	OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		1	+290=	
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2		TOTAL	U	OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II					TOTAL	514	IOH	OTHER	THAN
		(Column 1)	(Column 2) (Column HIGHEST			(Column 3)		SMALL ENTITY			SMALL!	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF MU	Minus	***	C: 4114	=		X43=		OR	X86=	
	FIRST PRESE	INTATION OF ME	JLTIPLE DEF	ENDENI	CLAIM			+.145=		OR	+290=	
					•		L	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .				X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	ENDENT.	CL AINA	=		X43=		OR	X86=	
	FIRST PRESE	INTATION OF MIC	LIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
						. Al	TOTAL DDIT, FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	ı					
MEN	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
** 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								——	OB L	TOTAL DDIT. FEE	
7	he *Highest Num	ber Previously Paid	For" (Total or	Independen	iess than it) is the l	i 3, enter 3. highest number		DIT. FEE	opriate box			,